

TRANSMITTAL OF UTILITY APPLICATION UNDER 37 C.F.R. §1.53 Attorney Docket No. 37610-6049 First named inventor G. Enos Express mail label # EL688289691US Date of mailing November 7, 2001

Application Elements	Accompanying Application Papers			
1. [X] Fee Transmittal Form	6. [] Copy of assignment documents from parent applications			
2. [X] Specification containing 38 pages (including Claims and Abstract).	7. [] Preliminary Amendment			
a. Title: METHOD AND APPARATUS FOR PERSONALIZED MEDICAL PRESCRIPTION SERVICES	8. [X] Return Receipt Postcard 9. [] Small Entity Statement			
b. Number of claims: 27	orty officer officer			
3. [X] 19 sheets of drawings				
4. [] Declaration				
5. [] Sequence Listing				
[] Paper copy (identical to computer copy)				
[] Computer readable copy				
[] Verified statement				
	SIGNATURE OF ATTORNEY/AGENT			
	HELLER EHRMAN WHITE & McAULIFFE LLP David A. Hall			
[X] Benefit of priority: Benefit of priority to U.S. Bra	Registration Number: 32,233			

[X] Benefit of priority: Benefit of priority to U.S. Provisional Patent Application Serial No. 60/246,826 filed November 8, 2000. The subject matter of that patent application is incorporated into this application in its entirety.

CORRESPONDENCE ADDRESS				
NAME	David A. Hall Registration No. 32,233 Heller Ehrman White & McAuliffe LLP			
Address	4350 La Jolla Village Drive, 7th Floor, San Diego, CA 92122-1246			
	Telephone: (858) 450-8400	Facsimile: (858) 587-5360		

FEE TRANSMITTAL ACCOMPANYING UTILITY APPLICATION UNDER 37 C.F.R. §1.53	Attorney Docket No.	37610-6049
	First named inventor	G. Enos
	Express mail label #	EL688289691US
	Date of mailing	November 7, 2001

FEE CALCULATION FOR CLAIMS AS AMENDED

a)	Basic Fee		\$740/\$370)\$	370.00
b)	Independent Claims	<u>4</u> - 3 =	1 x \$84/\$42	\$	42.00
c)	Total Claims	27 - 20 =	7 x \$18/\$9	\$	63.00
d)	Fee for Multiple Deper	ndent Claims =	\$280/\$140	\$	0.00
		TOTA	L FILING FEE	s .	475 00

- [X] Applicant is a small entity.
- [X] A check is enclosed in the amount of \$475.00 to cover the fee for filing the application.
- [] Charge \$_____ to Deposit Account No. 50-1213.
- [X] The Commissioner is hereby authorized to charge any fees that may be required in this application under 37 C.F.R. §§ 1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1213. If proper payment is not enclosed, such as a check in the wrong amount, unsigned, post-dated, otherwise improper or informal, or absent, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1213 during the entire pendency of this application. This sheet is filed in duplicate.

CORR	ESPONDENCE ADDRESS				
NAME	David A. Hall Registration No. 32,233 Heller Ehrman White & McAuliffe LLP				
Address	4350 La Jolla Village Drive, 7th Floor, San Diego, CA 92122-1246				
	Telephone: (858) 450-8400 Facsir		mile: (858) 587-5360		
Submitted by	<i>/</i> :		L		
Typed or printed name	David A. Hall		Reg. Number	32,233	
Signature	Part DHall Date		N. 7, 2001	Deposit Account	50-1213